

2004 MICHIGAN Single Business Tax Notice of No SBT Return Required

Issued under authority of P.A. 228 of 1975. See instruction booklet for filing guidelines.

2004
C-8030
SCHEMA DRAFT
8/9/04

▶ 1. This notice is for calendar year 2004 or for the following tax year: Beginning Date Ending Date month year month year <div style="border: 1px solid black; width: 100px; height: 15px; margin: 2px auto;"></div> <div style="border: 1px solid black; width: 100px; height: 15px; margin: 2px auto;"></div>		2. Name (including DBA), Address, City, State, ZIP Code
▶ 3. Federal Employer Identification Number (FEIN) or TR Number		

4. Enter the gross receipts.

Tax periods less than 12 months must be annualized, see instructions.

If the business is taxable in another state, use apportioned gross receipts

and attach Form C-8000H ▶ 4. _____

▶ 5. Enter the business income for the taxable year 5. _____

- 6. Check this box if apportioned or allocated gross receipts on line 4 are less than \$350,000 *and* this situation is expected to continue or if the business discontinues. If this box is checked, this SBT account will be made inactive. If gross receipts are \$350,000 or more, an *SBT Annual Return* (Form C-8000 or C-8044) must be filed, even if no tax is owed** ▶ 6. ☐

If the amount on line 4 is \$350,000 or more, an annual return must be filed.

TAXPAYER'S DECLARATION <i>I declare under penalty of perjury that this C-8030 Return is true and correct to the best of my knowledge.</i> I authorize Treasury to discuss my return with my preparer. <input type="checkbox"/> Yes <input type="checkbox"/> No		PREPARER'S DECLARATION <i>I declare under penalty of perjury that this C-8030 Return is based on all information of which I have any knowledge.</i> Preparer's Signature	
Taxpayer's Signature	Date	Preparer's Name Printed	Date
Taxpayer's Name Printed		Business Address, Phone and Identification Number	
Title			

Corporations: Attach a copy of U.S. 1120, 1120A, or 1120S, pages 1 - 4. If filing as part of a consolidated federal return, attach a proforma or consolidated schedule.

Individuals & Fiduciaries: Attach copies of U.S. 1040, Schedule C, C-EZ, D and E and 4797.

Partnerships: Attach copies of U.S. 1065, pages 1 - 4 and 8825.

Limited Liability Companies: Attach appropriate schedules shown above based on federal return filed.

Attach all applicable schedules and mail to:

Michigan Department of Treasury
P.O. Box 30059
Lansing, MI 48909